

# Crisis Intervention Team (CIT) Training



**Student Guide**

## Assessment and Commitment

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# Assessment and Commitment

## State Statutes Governing Psychiatric Intervention and Treatment in New Mexico

### 43-1-11. Commitment of adults for thirty-day period

A. Every adult client involuntarily admitted to an evaluation facility pursuant to Section 43-1-10 NMSA 1978 has the right to a hearing within seven days of admission unless waived after consultation with counsel. If a physician or evaluation facility decides to seek commitment of the client for evaluation and treatment, a petition shall be filed with the court within five days of admission requesting the commitment. The petition shall include a description of the specific behavior or symptoms of the client that evidence a likelihood of serious harm to the client or others and shall include an initial screening report by the evaluating physician individually or with the assistance of a mental health professional or, if a physician is not available, by a mental health professional acceptable to the court. The petition shall list the prospective witnesses for commitment and a summary of the matters to which they will testify. Copies of the petition shall be served on the client, the client's guardian, and treatment guardian if one has been appointed, and the client's attorney.

B. At the hearing, the client shall be represented by counsel and shall have the right to present evidence on the client's behalf, including testimony by an independent mental health professional of the client's own choosing, to cross-examine witnesses and to be present at the hearing. The presence of the client may be waived upon a showing to the court that the client knowingly and voluntarily waives the right to be present. A complete record of all proceedings shall be made.

C. A court-appointed guardian for an adult involved in an involuntary commitment proceeding shall have automatic standing to appear at all stages of the proceeding and shall be allowed to testify by telephone or through affidavit if circumstances make live testimony too burdensome.

D. The court shall include in its findings the guardian's opinion regarding the need for involuntary treatment or a statement detailing the efforts made to ascertain the guardian's opinion.

E. Upon completion of the hearing, the court may order a commitment for evaluation and treatment not to exceed thirty days if the court finds by clear and convincing evidence that:

- (1) as a result of a mental disorder, the client presents a likelihood of serious harm to the client's own self or others;**
- (2) the client needs and is likely to benefit from the proposed treatment; and**
- (3) the proposed commitment is consistent with the treatment needs of the client and with the least drastic means principle.**

F. Once the court has made the findings set forth in Subsection E of this section, the court shall hear further evidence as to whether the client is capable of informed consent. If the court determines that the client is incapable of informed consent, the court shall appoint for the client a treatment guardian who shall have only those powers enumerated in Section 43-1-15 NMSA 1978.

G. An interested person who reasonably believes that an adult is suffering from a mental disorder and presents a likelihood of serious harm to the adult's own self or others, but does not require emergency care, may request the district attorney to investigate and determine whether reasonable grounds exist to

commit the adult for a thirty-day period of evaluation and treatment. The applicant may present to the district attorney any medical reports or other evidence immediately available to the applicant, but shall not be required to obtain a medical report or other particular evidence in order to make a petition. The district attorney shall act on the petition within seventy-two hours. If the district attorney determines that reasonable grounds exist to commit the adult, the district attorney may petition the court for a hearing. The court may issue a summons to the proposed client to appear at the time designated for a hearing, which shall be not less than five days from the date the petition is served. If the proposed client is summoned and fails to appear at the proposed time and upon a finding of the court that the proposed client has failed to appear, or appears without having been evaluated, the court may order the proposed client to be detained for evaluation as provided for in Subsection C of Section 43-1-10 NMSA 1978.

H. Any hearing provided for pursuant to Subsection G of this section shall be conducted in conformance with the requirements of Subsection B of this section.

History: 1953 Comp., § 34-2A-10, enacted by Laws 1977, ch. 279, § 10; 1978, ch. 161, § 5; 1979, ch. 396, § 3; 1989, ch. 128, § 7; 2009, ch. 159, § 14.

## **43-1-10. Emergency mental health evaluation and care**

**A. A peace officer may detain and transport a person for emergency mental health evaluation and care in the absence of a legally valid order from the court only if:**

- (1) the person is otherwise subject to lawful arrest;
- (2) the peace officer has reasonable grounds to believe the person has just attempted suicide;
- (3) the peace officer, based upon the peace officer's own observation and investigation, has reasonable grounds to believe that the person, as a result of a mental disorder, presents a likelihood of serious harm to himself or herself or to others and that immediate detention is necessary to prevent such harm. Immediately upon arrival at the evaluation facility, the peace officer shall be interviewed by the admitting physician or the admitting physician's designee; or
- (4) a physician, a psychologist or a qualified mental health professional licensed for independent practice who is affiliated with a community mental health center or core service agency has certified that the person, as a result of a mental disorder, presents a likelihood of serious harm to himself or herself or to others and that immediate detention is necessary to prevent such harm. Such certification shall constitute authority to transport the person.

B. An emergency evaluation under this section shall be accomplished upon the request of a peace officer or jail or detention facility administrator or that person's designee or upon the certification of a physician, a psychologist or a qualified mental health professional licensed for independent practice who is affiliated with a community mental health center or core service agency. A court order is not required under this section. If an application is made to a court, the court's power to act in furtherance of an emergency admission shall be limited to ordering that:

- (1) the client be seen by a certified psychologist or psychiatrist prior to transport to an evaluation facility; and
- (2) a peace officer transport the person to an evaluation facility.



## **Criteria Considered for Inpatient Admission into Psychiatric Hospital:**

- Psychiatric Illness
- Danger or self or others
- If the patient will benefit from treatment
- Medical staff must consider the least restrictive option

## **Goals of Hospitalization**

- Safety
- Evaluation
- Stabilization
- Treatment (medication management and psychotherapy)

The goals for hospitalization parallel the reasons for commitment. There must be reasonable efforts to assure that hospitalization will improve the safety of the patient and those affected by the patient. The hospital will perform an evaluation to confirm a treatable illness, and stabilize that person by giving treatment for their illness.

## **Treatments and Interventions in the hospital**

- Medical management
  - Treatment for chronic/acute illnesses that can be made worse by psychiatric problems
  - Treatment teams may include social workers, nurses, therapists, doctors, discharge planners and peer advocates
- Medications by mouth or injectable
- Psychotherapy: milieu, individual, group
  - Long term intensive talk therapy is not available in the hospital, which is often a misconception made by patients and families.
  - There will not be daily one-hour one-on-one sessions with therapists to have in-depth psychoanalytic breakthroughs.
  - Instead, group therapy and other therapies offered such as AA meetings, Occupational and Physical Therapy
- Safe placements
  - Boarding home
  - Group home
  - Nursing home
  - Family members